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CONFIRMATION NO. 9062

| SERIAL NUMBER | FILING or 371(c) DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. | | |
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| 10/692,918 | 10/24/2003 RULE | 435 | 1632 | CARP0015-101 | | |
| APPLICANTS Frank Grosveld, Rotterdam, NETHERLANDS; ** CONTINUING DATA ***** This application is a CON of PCT/IB02/02424 04/24/2002 ** FOREIGN APPLICATIONS ***** UNITED KINGDOM GB0110029.6 04/24/2001 ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** 02/23/2004 | | | | | | |
| Foreign Priority claimed 35 USC 119(a-d) conditions met Verified and Acknowledged | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No /ANOOOP KUMAR SINGH/ Examiner's Signature | <input type="checkbox"/> Met after Allowance aks Initials | STATE OR COUNTRY NETHERLANDS | SHEETS DRAWINGS 1 | TOTAL CLAIMS 32 | INDEPENDENT CLAIMS 2 |
| ADDRESS COZEN O'CONNOR, P.C. 1900 MARKET STREET PHILADELPHIA, PA 19103-3508 UNITED STATES | | | | | | |
| TITLE Immunoglobulin 1 | | | | | | |
| FILING FEE RECEIVED 738 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |